

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</i>	Attorney Docket No.	SP02-272	Total Pages	2
	First Named Inventor or Application Identifier: Ma Sha			
	Title : PROTEIN CRYSTALLOGRAPHY HANGING DROP MULTIWELL PLATE			
	Express Mail Label No.	EV327189555US		

CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR 1.10:
 I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is Addressed to Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on October 27, 2003
 (Date)

Signature _____

Thomas R. Beall

"EXPRESS MAIL" Mailing Label No. EV327189555US

ADDRESS TO:

Mail Stop Patent Application
 Commissioner of Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450



<p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>18</u>] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113) [Total Sheets <u>5</u>]</p> <p>4. Oath or Declaration [Total Pages <u>2</u>] a. <input checked="" type="checkbox"/> Executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 16 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p>	<p>5. <input type="checkbox"/> Microfiche Computer Program (<i>Appendix</i>)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</p>
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ACCOMPANYING APPLICATION PARTS

- | | |
|--|--|
| 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney
<i>(when there is an assignee)</i> | |
| 9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> | |
| 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations | |
| 11. <input type="checkbox"/> Preliminary Amendment | |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(should be specifically itemized)</i> | |
| 14. <input type="checkbox"/> Certified Copy of Priority Document(s) 15. <input type="checkbox"/> Other: | |
| <i>(if foreign priority is claimed)</i> | |

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____
 Prior application information: Examiner: _____ Group / Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label <u>22928</u> or <input type="checkbox"/> Correspondence address below					
NAME	<u>g</u>				
ADDRESS	Corning Incorporated, SP-TI-3-1				
CITY	Corning	STATE	NY	ZIP CODE	14831
COUNTRY	USA	TELEPHONE	607-974-3921	FAX	(607) 974-3848
Name (Print/Type)	Thomas R. Beall		Registration No. (Attorney/Agent)		40,424
Signature	<u>g</u>		Date	October 27, 2003	

01919 U.S. PTO

**FEE TRANSMITTAL
for FY 2003****Complete if Known**

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Ma Sha
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned

TOTAL AMOUNT OF PAYMENT (\$)770.00

Attorney Docket Number SP02-272

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

03-3325

Deposit
Account
Name

Corning Incorporated

- ☒ Charge Any Additional Fees Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
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1001	770	Utility filing fee	770.00
1002	340	Design filing fee	—
1003	530	Plant filing fee	—
1004	770	Reissue filing fee	—
1005	160	Provisional filing fee	—

SUBTOTAL (1) (\$770.00)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	17 - 20** = 0 x 18 =		00.00
Independent Claims	2 - 3** = 0 x 86 =		00.00
Multiple Dependent	0 =		0.00

**or number previously paid, if greater; For Reissues, see below

Large Entity

Fee Code	Fee (\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent claims in excess of 3
1203	290	Multiple dependent claim, if not paid 0
1204	86	** Reissue independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$00.00)**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
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1051	130	Surcharge - late filing fee or oath	—
1052	50	Surcharge - late provisional filing fee or cover sheet	—
1053	130	Non-English specification	—
1812	2,520	For filing a request for reexamination	—
1804	920*	Requesting publication of SIR prior to Examiner action	—
1805	1,840	Requesting publication of SIR after Examiner action	—
1251	110	Extension for reply within first month	—
1252	420	Extension for reply within second month	—
1253	950	Extension for reply within third month	—
1254	1,480	Extension for reply within fourth month	—
1255	2,010	Extension for reply within fifth month	—
1401	330	Notice of Appeal	—
1402	330	Filing a brief in support of an appeal	—
1403	290	Request for oral hearing	—
1451	1,510	Petition to institute a public use proceeding	—
1452	110	Petition to revive - unavoidable	—
1453	1,330	Petition to revive - unintentional	—
1501	1,330	Utility issue fee (or reissue)	—
1502	480	Design issue fee	—
1503	640	Plant issue fee	—
1460	130	Petitions to the Commissioner	—
1807	50	Petitions related to provisional applications	—
1806	180	Submission of Information Disclosure Stmt	—
8021	40	Recording each patent assignment per property (times number of properties)	—
1809	770	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	—
1810	770	For each additional invention to be examined (37 C.F.R. § 1.129(b))	—
1801	770	Request for Continued Examination (RCE)	—
1802	900	Request for expedited examination of a design application	—

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**SUBMITTED BY****Completed (if applicable)**

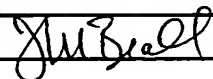
Name (Print/Type)

Thomas R. Beall

Registration No. (Attorney/Agent)

40,424

Signature



Date

October 27, 2003